REMARKS/ARGUMENTS

Claims 1-83 were originally submitted in this application. However, Applicants cancelled claims 21-71 and 78-83 without prejudice in response to an earlier Restriction Requirement. Thus, claims 1-20 and 72-77 are pending in this application.

Claims 1-4, 8 and 13-16 stand rejected under 35 U.S.C. 102(e) as being anticipated by US 20050038387 to Kriesel et al. Claims 1, 3-11, 13, 15-19, 72, 73, 75 and 76 stand rejected under 35 U.S.C. 102(b) as being anticipated by US 5,941,846 to Duffy et al. Claims 1, 3-11, 13, 15-19 and 72-77 stand rejected under 35 U.S.C. 102(b) as being anticipated by US 5,431,509 to Anderson et al. Claims 1-20, 72, 73, 75, and 76 stand rejected under 35 U.S.C. 102(b) as being anticipated by US 5,713,856 to Eggers et al. These rejections are respectfully traversed for the reasons that follow.

Claims 1-3, 8-12 and 72-74 have been cancelled without prejudice. Claim 4 has been amended for proper antecedent basis and to depend from claim 13 rather than cancelled claim 1. Claim 13 has been amended for greater clarity. The amendments are supported by the figures and the original specification, particularly on page 11, line 25 – page 13, line 14. Thus, no new matter has been added.

In US 20050038387, Kriesel et al. disclose a single multiple channel infusion system or compact fluid dispenser that dispenses medicaments from a plurality of pre-filled containers, fluid reservoirs or vials 52, 52b that it receives. While the overall infusion system disclosed by Kriesel is a "medical device" as the term is used in the present application, the vials or fluid reservoirs are not. In the context of the present invention, the term "medical device" includes without limitation a device that acts upon a cassette, reservoir, vial, syringe, or tubing to convey medication or fluid to or from a patient (for example, an infusion pump, a patient controlled analgesia (PCA) or pain management medication pump, or a suction pump), a monitor for monitoring patient vital signs or other parameters, or a diagnostic device. [page 4, line 28-page 5, line 3 of the present application] Furthermore, the element 94 referenced by the Examiner in Fig. 1 of Kriesel et al. is merely a removable protective closure cap for the vial [See paragraph 0096], and not a blocking element in the sense of the present application since it doesn't block connection of another pump, monitor or diagnostic instrument to the pump.

Eggers et al. US 5,713,856 discloses an interlocking modular medical device system with a central processing unit or advanced processing unit 100 and multiple functional units 150 removably attachable to either side of the central processing unit (CPU). The CPU and functional units have matable connectors 130, 132 (Col. 4, lines 27-42) on both sides and thus nothing prevents a third functional unit from being added to either the opposite side of the CPU or one of the other functional units.

Duffy et al. US 5,941,846 discloses a power and data connection scheme for the interlocking modular medical device system of Eggers et al. In the description cited by the Examiner in Column 4, lines 9-25, Duffy states that on each functional unit and the CPU there is a "latch mechanism for discouraging off-axis engagement of the modules and for providing mechanical stability to the engaged pair." Applicants respectfully submit that when the cited portion is read in full it does not show or suggest that another module cannot be attached, it simply means that if another module is to be attached it must be properly aligned or "not off-axis" and securely connected.

Anderson et al. US 5,431,509 discloses an interlocking medical instrument module system comprising up to three side-by-side interchangeable pumps designed such that not more than one module can be mounted on each side of the center module. Anderson discloses that any pump can be the center pump and retractable latching arms are automatically moved when the center pump is mounted to a pole such that the two side modules can be attached to the center module but the latching arm of the side modules prevent additional modules from being mounted to the side modules. However, it is critical to note that, unlike the blocking means in the claimed invention, the latching arms disclosed by Anderson et al. do not prevent the third pump from being attached to the center pump when the first (center) and second pump are attached.

Thus, none of the cited references show a system of two interlocking medical devices in which at least one of the first and second medical device includes a blocking means for preventing a third medical device from attaching to either one of the first medical device and second medical device once the first medical device and the second medical device are attached. Thus, the prior art cited does not include each and every element of the claimed invention as required to anticipate claim 13 under 35 U.S.C. 102. Furthermore, none of the references fairly suggest the claimed invention as discussed above. In fact, the prior art teaches away from the present

invention, which is additional evidence of its novelty and non-obviousness. Thus, it is respectfully submitted that claim 13 is allowable over the prior art. Claims 4-7, 14-20 and 75-77 depend from claim 13 and at least derive their patentability therefrom.

No fees or requests for extension of time are believed to be due in connection with this paper; however, the Commissioner is authorized to consider this a request for any additional extension of time and to charge our Deposit Account 50-3118 for any additional fees (or credit any over payments) that may be required in association with this communication for which full payment has not been tendered.

Applicants respectfully request that this application be favorably considered and that a timely Notice of Allowance be issued on the remaining claims.

Respectfully submitted,
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